Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
SPINELLI'S PIZZA	Est 812-308-3004	04/03/2024	
Address 129 W MAIN ST, NEW ALBANY IN 47150	Own 502-599-1663		

Owner	Purpose	Follow Up	Released
ABBIE WHITE	X Routine		04/03/2024
Owner's Address 306 HIDDEN OAK WAY LOUISVILLE, KY 40222	___Follow-up		
Person in Charge GRAYDON CLARK	___Complaint		
Responsible Person's Email SPINELLISYO@GMAIL.COM	___Pre-Operational		
Certified Food Handler	___Temporary	**Menu Type**	
	___HACCP	1 __ 2 X 3 __ 4 __ 5 __	
	___Other (list)		

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
415	X			Observed mouse droppings behind the freezer.	10 DAYS
218		X		Observed a torn gasket on the cold table.	2 WEEKS
232		X		Observed bare wood ceilings and walls of the kitchen. Surfaces must be smooth and easily cleanable.	2 WEEKS
309		X		Observed no ventilation in the employee bathroom by the mixing room.	2 WEEKS
351		X		Observed no covered trashcan in the public bathroom.	10 DAYS
413		X		Observed no auto closer on the back door of the kitchen.	2 WEEKS
430		X		Observed a hole in the wall of the public bathroom.	2 WEEKS

Summary of Violations C 1 NC 6 R 0 7

Received by (name and title printed):	Inspected by (name and title printed):
ABBIE WHITE	John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: